

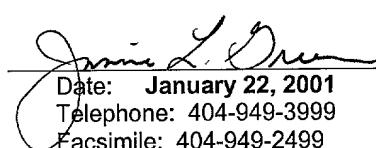
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JC962 U.S. PTO  
10/22/01

<b>UTILITY PATENT APPLICATION TRANSMITTAL</b>		<i>Title of Invention</i>	Compositions and Methods for Inhibiting Cellular Proliferation
(Only for new nonprovisional applications under 37 CFR 1.53(b))		<i>Named Inventor(s)</i>	Adonia E. Papathanassiu and Shawn J. Green
		<i>Attorney Docket</i>	05213-0294 (43170-252538)
		<i>Express Mail Label No.</i>	EL561427431US

JC531 U.S. PTO  
09/766778  
01/22/01

<b>APPLICATION ELEMENTS</b>		<b>ADDRESS TO:</b> Assistant Commissioner for Patents Box Patent Application Washington, D.C. 20231
		<b>ACCOMPANYING APPLICATION PARTS</b>
1. <input checked="" type="checkbox"/> Fee Transmittal Form (Submit an original, and a duplicate for fee processing)	2. <input checked="" type="checkbox"/> Applicant claims Small Entity status	7. <input type="checkbox"/> Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary) a. <input type="checkbox"/> Computer Readable Copy b. <input checked="" type="checkbox"/> Paper Copy (identical to computer copy) c. <input checked="" type="checkbox"/> Statement verifying identity of above copies
3. <input checked="" type="checkbox"/> Specification, Claims, and Abstract	Total Pages 29	8. <input type="checkbox"/> Assignment: a. <input type="checkbox"/> Assignment Papers (cover sheet & document(s)) b. <input checked="" type="checkbox"/> Assignment is of record in parent application No. 09/227,955
4. <input checked="" type="checkbox"/> Drawings	Total Sheets 6	9. <input type="checkbox"/> 37 CFR 3.73(b) Statement (when there is an assignee) <input type="checkbox"/> Power of Attorney by assignee
5. Oath or Declaration	Total Pages	10. <input type="checkbox"/> English Translation Document (if applicable)
a. <input type="checkbox"/> Newly executed (original or copy)		11. <input type="checkbox"/> Information Disclosure Statement (IDS) PTO-1449 <input type="checkbox"/> Copies of IDS Citations
b. <input checked="" type="checkbox"/> Copy from prior application (37 CFR 1.63(d)) (for continuation/divisional with Box 16 completed)		12. <input type="checkbox"/> Preliminary Amendment
The entire disclosure of the prior application, from which a copy of the oath or declaration is supplied under Box 5b, is considered as being part of the disclosure of the accompanying application and is hereby incorporated by reference therein.		13. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) (Should be specifically itemized)
(i) <input type="checkbox"/> <u>DELETION OF INVENTOR(S)</u> Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).		14. <input type="checkbox"/> Certified Copy of Priority Document(s)
6. <input type="checkbox"/> Microfiche Computer Program (Appendix)		15. <input checked="" type="checkbox"/> Other: Statement concerning Sequence Listing
16. If a <b>CONTINUING APPLICATION</b> , check appropriate box and supply the requisite information: <input checked="" type="checkbox"/> Continuation <input type="checkbox"/> Divisional <input type="checkbox"/> Continuation-in-part (CIP) of prior application No: 09/227,955, which was filed on 1/11/99, which is a continuation of 08/796,850, filed 2/6/97, now Patent No. 5,981,471.		
17. CORRESPONDENCE ADDRESS:  By:  Jamie L. Greene KILPATRICK STOCKTON LLP 2400 Monarch Tower 3424 Peachtree Road, N.E. Atlanta, Georgia 30326		
Reg. No. 32,467 Date: January 22, 2001 Telephone: 404-949-3999 Facsimile: 404-949-2499		

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**FEE TRANSMITTAL**

Attorney Docket No. 05213-0294 (43170-252538 )

This sheet accompanies a patent application transmittal for the following application:

Inventor(s): **Adonia E. Papathanassiou and Shawn J. Green**Filing Date: **January 22, 2001**Title: **Compositions and Methods for Inhibiting Cellular Proliferation**

The filing fee is calculated as shown below:

**1. FILING FEE:**

FOR:	FEE	FEES PAID	FEE	FEES PAID
<input checked="" type="checkbox"/> UTILITY FILING FEE	\$355	\$355	\$710	
<input type="checkbox"/> DESIGN FILING FEE	\$160		\$320	
<input type="checkbox"/> PLANT FILING FEE	\$245		\$490	
<input type="checkbox"/> REISSUE FILING FEE	\$355		\$710	
<input type="checkbox"/> PROVISIONAL FILING FEE	\$75		\$150	
	<b>SUBTOTAL (1)</b>	<b>\$355</b>		<b>\$</b>

**2. CLAIMS:**

FOR:	NO. FILED	NO. EXTRA	RATE	FEES	RATE	FEES
TOTAL CLAIMS	3 - 20 =	0	x 9 =		x 18 =	
INDEP. CLAIMS	1 - 3 =	0	x 40 =		x 80 =	
	<input type="checkbox"/> MULTIPLE DEPENDENT CLAIM PRESENTED		+135 =		+270 =	
			<b>SUBTOTAL (2)</b>	<b>\$0</b>		<b>\$</b>

**3. ADDITIONAL FEES:**

FOR:	FEE	FEES PAID	FEE	FEES PAID
<input type="checkbox"/> LATE FILING, FEE OR OATH	\$65		\$130	
<input type="checkbox"/> NON-ENGLISH SPECIFICATION	\$130		\$130	
<input type="checkbox"/> OTHER				
	<b>SUBTOTAL (3)</b>	<b>\$</b>		<b>\$</b>

**TOTAL FILING FEES: \$355.00**A check is enclosed for the total amount: **\$355.00** Charge any additional fees required under 37 C.F.R. 1.16 or 1.17 to Deposit Account 11-0855.

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